

State of Rhode Island and Providence Plantations Department of State - Business Services Division

FILED

JAN 2 3 2017 02/

Filing Period: January 1 - March 1
Filing Fee: \$50.00
Panalty: Additional \$25.00 fee if for

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| BY | $ \frac{1}{2}$ $\frac{1}{2}$ | 1.1 | |
| | | _ | |

| . Corporate ID No. 310861 | l l | Services, Inc. | | | |
|--|--------------------|---|------------------------------|-------------------------------|----------------------------|
| 3. Street Address Principal Busin 84 Wales Street, Suite | | | City Cranston | State RI | 02920 |
| 4. NAICS Code 44-45 | | 5. State of Incorporation Rhode Island | | | - |
| 7 | ct a business for | ucted in Rhode Island the sale, distribution, ser (CERS: ("X" BOX FOR ATT | | | SING ATTACHMENTS |
| Street Address 84 Wales Street, Suite | 100 | | Street Address | | |
| City Cranston | State RI | ^{Zip} 02920 | Сиу | State | Zip |
| Secretary Name Gerald D. Blake, Jr. | | Treasurer Name Gerald D. Blake, Jr. | | | |
| Street Address 84 Wales Street, Suite 100 | | Street Address 84 Wales Street, Suite 100 | | | |
| City Cranston | State RI | Zip 02920 | City Cranston | State RI | 7 Zip 02920 |
| Director Name Street Address | | | Director Name Street Address | | |
| City | State | Zip | City | State | Zip |
| Director Name | J | | Director Name | | |
| Street Address | | | Street Address | | |
| Сйу | State | Zip | City | State | Zip |
| 9. SHARES AUTHORIZED: ("X" BOX FOR ATTACHMENT) | | 10. SHARES ISSUED: ("X" BOX FOR ATTACHMENT) ISSUED SHARES - THIS SECTION MUST BE COMPLETED | | | |
| This information is currently of record in the Office of the Secretary of State. Changes require an additional filing. See Section 9 of instruction sheet. | | Number of Shares Class/Series Par Value 1,000 shares common stock of \$.01 par value | | | |
| | | 1,000 Shares com | mon stock of 4.01 par v | | |
| 1. This report must be exe | ecuted on behalf o | f the corporation by an auth | l orized representative | e. If the corporation is in t | he hands of a receiver |
| - | | alf of the corporation by the | | | |
| ler penalty of perjury, I declar tained herein are true and co | | have examined this report, incl — — Posido | | ng schedules and statements | s, and that all statements |
| nature | 1 | 1/2000 | | Date | ' / |
| erald D. Blake, Jr. | | n | | | |
| int or Type Name | | | | | |
| resident | | | | | |

MAIL TO:

Division of Business Services

148 W. River Street, Providence, Rhode Island 02904-2615

Phone: (401) 222-3040 Website: www.sos.ri.gov

Form 630 - Revised: 10/2016